## Case 17-14530 Doc 1 Filed 05/09/17 Entered 05/09/17 15:13:33 Desc Main Document Page 1 of 52

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
Write the name that is on your government-issued picture identification (for example, your driver's	Atanya First name  Marie	First name	
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Miller	
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7891	

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Debtor 1 Atanya Marie Miller

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
business names and ployer Identification nbers (EIN) you have d in the last 8 years and trade names and by business as names	I have not used any business name or EINs.  Business name(s)	☐ I have not used any business name or EINs.  Business name(s)		
	EINS	EINs		
ere you live		If Debtor 2 lives at a different address:		
	Number, Street, City, State & ZIP Code  Will	Number, Street, City, State & ZIP Code		
	County	County		
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
y you are choosing district to file for kruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		
	alloyer Identification obers (EIN) you have it in the last 8 years and the trade names and group business as names.  The you live are choosing district to file for	In the last 8 years  Ide trade names and g business as names  Business name(s)  Business name(s)  Business name(s)  EINs  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code  Viul County  If you are choosing district to file for kruptcy  Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason.		

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Case number (if known) Debtor 1 Atanya Marie Miller

Par	t 2: Tell the Court About	Your E	Bankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by 1</i> page 1 and check the appropriate	1 U.S.C. § 342(b) for Individuals Filing for Bankrup box.	otcy
	choosing to file under		Chapter 7				
			Chapter 11				
			Chapter 12				
			Chapter 13				
3.	How you will pay the fee	•	about how yo	ou may pay. Typ attorney is subr	ically, if you are paying the fee you	with the clerk's office in your local court for more ourself, you may pay with cash, cashier's check, or relf, your attorney may pay with a credit card or check.	noney
						n, sign and attach the Application for Individuals to	Pay
			I request that but is not req	ut my fee be wa uired to, waive y	our fee, and may do so only if you	only if you are filing for Chapter 7. By law, a judge ir income is less than 150% of the official poverty li	ne that
						installments). If you choose this option, you must f al Form 103B) and file it with your petition.	ill out
).	Have you filed for bankruptcy within the	■ N	0.				
	last 8 years?	☐ Y	es.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy cases pending or being	■ N	0				
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Y	es.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	ПΝ	o. Go to I	ine 12.			
	residence:	Y	es. Has yo	our landlord obta	ined an eviction judgment against	you and do you want to stay in your residence?	
			•	No. Go to line	12.		
				Yes. Fill out In bankruptcy pet		udgment Against You (Form 101A) and file it with t	his

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Document Page 4 of 52 Case number (if known) Debtor 1 **Atanya Marie Miller** Part 3: Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor ■ No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention?

Number, Street, City, State & Zip Code

Where is the property?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

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Debtor 1 Atanya Marie Miller

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	tor 1 Atanya Marie Mille	er	Docum	————	Case numbe	(if known)
Part	6: Answer These Quest	ions for R	eporting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 1 individual primarily for a personal, family, or household purpose."			ned in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily to money for a business or inv			
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you	owe that are not consu	mer debts or busines	s debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. are paid that funds will be a			erty is excluded and administrative expenses
	administrative expenses are paid that funds will		■ No			
	be available for distribution to unsecured creditors?		☐ Yes			
18.		<b>■</b> 1-49		<b>1</b> ,000-5,000	)	□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		<b>5001-10,000</b>	0	<b>5</b> 0,001-100,000
		□ 100-1 □ 200-9		☐ 10,001-25,0	000	☐ More than100,000
19.	How much do you	<b>\$</b> 0 - \$	50 000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,00°	1 - \$50 million	☐ \$1,000,000,001 - \$10 billion
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,00 <sup>2</sup> □ \$100,000,00		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
			·			_
20.	How much do you estimate your liabilities	\$0 - \$		□ \$1,000,001 □ \$10,000,00°		☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion
	to be?		001 - \$100,000 001 - \$500,000	□ \$10,000,000 □ \$50,000,000	•	□ \$1,000,000,001 - \$10 billion
			001 - \$500,000 001 - \$1 million		01 - \$500 million	☐ More than \$50 billion
Part	7: Sign Below					
For	you	I have ex	camined this petition, and I de	eclare under penalty of	perjury that the inform	nation provided is true and correct.
						under Chapter 7, 11,12, or 13 of title 11, noose to proceed under Chapter 7.
			rney represents me and I did nt, I have obtained and read t			t an attorney to help me fill out this
		I request	relief in accordance with the	chapter of title 11, Unit	ed States Code, spec	cified in this petition.
		bankrupt and 357	cy case can result in fines up			or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Atanya	Marie Miller e of Debtor 1		Signature of Debto	r 2
		Executed	d on <b>May 9, 2017</b>		Executed on	
			MM / DD / YYYY			/ DD / YYYY

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Debtor 1 Atanya Marie Miller Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christina Banyon	Date	May 9, 2017
Signature of Attorney for Debtor		MM / DD / YYYY
Christina Banyon		
Printed name		
Banyon & Scheinbaum, LLC		
Firm name		
3077 West Jefferson Street		
Suite 107		
Joliet, IL 60435		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	cbanyon.law@gmail.com
6283282		
Bar number & State		

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		Docume	ent Page 8 of 52	
Fill in this inforn	nation to identify your	case:		
Debtor 1	Atanya Marie Mill	er		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				☐ Check if this is an amended filing
	·			

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,200.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,200.00
Pai	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	17,676.00
	Your total liabilities	\$	17,676.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,560.12
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,480.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.

2,911.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

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Fill in this inforr	nation to identify your			
Debtor 1	Atanya Marie Mill	er		
Dahaan	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT O	PF ILLINOIS	
Case number _				☐ Check if this is an amended filing
Official Fo	rm 106A/B			
Schedul	e A/B: Prop	erty		12/15
hink it fits best. B nformation. If more Answer every ques	e as complete and accura e space is needed, attach stion.	te as possible. If two married a separate sheet to this form	ice. If an asset fits in more than one category, list the people are filing together, both are equally responsion. On the top of any additional pages, write your name	ble for supplying correct
	<del>_</del>		You Own or Have an Interest In	
. Do you own or h	nave any legal or equitable	interest in any residence, bu	uilding, land, or similar property?	
No. Go to Par				
☐ Yes. Where is	s the property?			
Part 2: Describe	Your Vehicles			
			icles, whether they are registered or not? Incluicle G: Executory Contracts and Unexpired Leases.	de any vehicles you own that
3. Cars, vans, tr	ucks, tractors, sport ut	ility vehicles, motorcycles	s	
■ No				
☐ Yes				
Examples: Boa			al vehicles, other vehicles, and accessories sels, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
			tries from Part 2, including any entries for>	\$0.00
Part 3: Describe	Your Personal and House	ehold Items		
·	, , , ,	able interest in any of the	following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<ul><li>6. Household go Examples: Ma □ No ■ Yes. Description</li></ul>		linens, china, kitchenware		
	Mico Hou	sehold Goods and Fur	miture of Dobtor	\$1,000.00
	Wilse. Hou	sendia Godas ana Fur	inture of Deptor	φι,υυυ.υυ

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Dobtor 1	Case 17-14530	Doc 1	Filed 05/09/17 Document	Entered 05/09/17 15:13:33 Page 11 of 52 Case number (if known)	Desc Main
Debtor 1	Atanya Marie Miller			Case number (if known,	
	Cell Ph	one			\$100.00
Examp	ibles of value les: Antiques and figurines; other collections, memo			oks, pictures, or other art objects; stamp, coir	n, or baseball card collections;
Examp	nent for sports and hobbie les: Sports, photographic, ex musical instruments  Describe		other hobby equipment;	bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
■ No	ms  ples: Pistols, rifles, shotguns  Describe	s, ammunitio	n, and related equipmen	t	
□ No	es  ples: Everyday clothes, furs  Describe	, leather coa	ts, designer wear, shoes	, accessories	
	Used C	lothing			\$500.00
■ No □ Yes.  13. <b>Non-fa</b> Exam			engagement rings, wed	ding rings, heirloom jewelry, watches, gems,	gold, silver
■ No	ther personal and househo	•	u did not already list, i	ncluding any health aids you did not list	
	the dollar value of all of your art 3. Write that number he			ny entries for pages you have attached	\$1,600.00
Part 4: De	escribe Your Financial Assets				
	wn or have any legal or eq	uitable inter	rest in any of the follow	ving?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. <b>Cash</b>					

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

■ No

☐ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

□ No

Institution name: ■ Yes.....

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Document Page 12 of 52 Case number (if known) Debtor 1 **Atanya Marie Miller TCF Checking Account** \$600.00 17.1. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.  $\hfill \square$  Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

 $\hfill \square$  Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

☐ Yes. Give specific information about them...

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the portion you own? Do not deduct secured claims or exemptions.

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Debtor 1	Atanya Marie Mil	ller	Document	Page 13 of 52 Case number (if known)	
	efunds owed to you				
■ No □ Yes	. Give specific informat	tion about them, inc	cluding whether you alre	eady filed the returns and the tax years	
■ No		7, 1	usal support, child supp	ort, maintenance, divorce settlement, property	settlement
Exam ■ No		isability insurance loans you made to		efits, sick pay, vacation pay, workers' comper	nsation, Social Security
	sts in insurance policingles: Health, disability,		nealth savings account (	HSA); credit, homeowner's, or renter's insurar	nce
■ Yes	. Name the insurance o	company of each p Company name:	olicy and list its value.	Beneficiary:	Surrender or refund value:
		Life Insurance Cash Value	- Through Employe	r No	Unknown
If you some		a living trust, exped	someone who has die ot proceeds from a life in	surance policy, or are currently entitled to rece	eive property because
Exam ■ No		oyment disputes, in	you have filed a lawsu surance claims, or rights	it or made a demand for payment is to sue	
■ No	contingent and unliq . Describe each claim.		every nature, includin	g counterclaims of the debtor and rights to	set off claims
■ No	nancial assets you di	-			
				ny entries for pages you have attached	\$600.00
Part 5: D	escribe Any Business-Ro	elated Property You	Own or Have an Interest	In. List any real estate in Part 1.	
■ No. G	own or have any legal of to Part 6. Go to line 38.	or equitable interest	in any business-related p	roperty?	
	escribe Any Farm- and C you own or have an intere		Related Property You Own Part 1.	n or Have an Interest In.	
46 Do vo	u own or have any led	gal or equitable in	terest in any farm- or	commercial fishing-related property?	

Official Form 106A/B Schedule A/B: Property page 4

No. Go to Part 7.

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Case number (if known) Document Debtor 1 **Atanya Marie Miller** ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$0.00 57. Part 3: Total personal and household items, line 15 \$1,600.00 Part 4: Total financial assets, line 36 58. \$600.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$2,200.00 \$2,200.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$2,200.00

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Official Form 106A/B Schedule A/B: Property page 5

Case 17-14530

Doc 1

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Fill in this infor	mation to identify your	case:		
Debtor 1	Atanya Marie Mill	er		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Ide	entify the	Property You	u Claim as	Exempt
-------------	------------	--------------	------------	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$100.00		\$100.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
\$500.00		\$500.00	735 ILCS 5/12-1001(a)
		100% of fair market value, up to any applicable statutory limit	
\$600.00		\$600.00	735 ILCS 5/12-1001(b)
		100% of fair market value, up to any applicable statutory limit	
Unknown		\$0.00	215 ILCS 5/238
		100% of fair market value, up to any applicable statutory limit	
	\$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00	\$1,000.00	Check only one box for each exemption.  \$1,000.00  \$1,000.00  \$1,000.00  \$100% of fair market value, up to any applicable statutory limit  \$500.00  \$500.00  \$100% of fair market value, up to any applicable statutory limit  \$100% of fair market value, up to any applicable statutory limit  \$500.00  \$100% of fair market value, up to any applicable statutory limit  \$600.00  \$100% of fair market value, up to any applicable statutory limit  \$100% of fair market value, up to any applicable statutory limit  \$100% of fair market value, up to any applicable statutory limit

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Debtor 1 Atanya Marie Miller

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

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Fill in this infor	Fill in this information to identify your case:							
Debtor 1	Atanya Marie Mill	ler						
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS					
Case number								
(if known)				☐ Check if this is an				
				amended filing				

### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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	Ca	136 17-14330 L	Document	Page 18 of 52	5 Desc Main
Fill	in this inforn	nation to identify your			
Deh	otor 1	Atanya Marie Mill	۵r		
DCD	nor i	First Name	Middle Name	Last Name	
	otor 2				
(Spot	use if, filing)	First Name	Middle Name	Last Name	
Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF IL	LINOIS	
Cas	e number				
(if kno	_				☐ Check if this is an
					amended filing
∩ffi	icial Forn	o 106E/E			
			ho Have Unsecured	l Claims	12/15
				TY claims and Part 2 for creditors with NONPRI	
Sche eft. <i>F</i>	dule D: Credite Attach the Con and case num	ors Who Have Claims Sec	ured by Property. If more space is ge. If you have no information to re	Do not include any creditors with partially secus needed, copy the Part you need, fill it out, nun eport in a Part, do not file that Part. On the top o	nber the entries in the boxes on the
		ors have priority unsecure			
	No. Go to P		a ciainis against you:		
		art 2.			
	☐ Yes.	II of Vour MONDDIODIT	V Unacquired Claims		
		II of Your NONPRIORIT			
3.	Do any credito	ors nave nonpriority unsec	cured claims against you?		
		ve nothing to report in this p	art. Submit this form to the court with	n your other schedules.	
	Yes.				
1	unsecured clair	m, list the creditor separately	y for each claim. For each claim liste	the creditor who holds each claim. If a creditor had, identify what type of claim it is. Do not list claims a have more than three nonpriority unsecured claim	s already included in Part 1. If more
					Total claim
4.1		an Anesthesiology A  Creditor's Name	Assoc. Last 4 digits of ac	count number	\$136.00
	PO Box		When was the deb	ot incurred?	
		d Park, IL 60499			
		treet City State Zlp Code	As of the date you	I file, the claim is: Check all that apply	
	_	rred the debt? Check one.	_		
	■ Debtor	• •	☐ Contingent		
	Debtor	•	Unliquidated		
	☐ Debtor	1 and Debtor 2 only	☐ Disputed		
		t one of the debtors and and		RITY unsecured claim:	
		if this claim is for a com	<u> </u>		
	debt Is the clai	m subject to offset?	☐ Obligations arising report as priority class.	ing out of a separation agreement or divorce that y	ou did not
	■ No			on or profit-sharing plans, and other similar debts	
	□ Yes		·	Medical Debt	
	_ 103		- Other, Specify		

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Amsurg Surgery Center	Last 4 digits of account number	\$13 <sub>0</sub>
Nonpriority Creditor's Name 998 129th Infantry Drive Joliet, IL 60435	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Central Credit Services	Last 4 digits of account number	\$66
Nonpriority Creditor's Name PO Box 1879	When was the debt incurred?	
Saint Charles, MO 63302  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The state year me, and chammer chook an unit apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collection	
Chase Receivables	Last 4 digits of account number	\$13
Nonpriority Creditor's Name PO Box 159	When was the debt incurred?	
Hawthorne, NY 10532 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	and a second sec	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Collection	

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] .	Creditors Protection Service	Last 4 digits of account number	\$164.00
	Nonpriority Creditor's Name 308 W. State Street, Suite 485 Rockford, IL 61101	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	□ Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	
	Dr Lucy Dey	Last 4 digits of account number	\$80.00
	Nonpriority Creditor's Name  202 N. Hammes Avenue	When was the debt incurred?	
	Suite C		
	Joliet, IL 60435	As of the date were file the elements. Observed all that seek	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	□ Yes	Other. Specify Medical	
	DuPage Pathology Nonpriority Creditor's Name	Last 4 digits of account number	\$118.00
	520 E. 22nd Street	When was the debt incurred?	
	Lombard, IL 60148  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	State jet ine, ine elemine. Grook all trial apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	$\square$ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other, Specify Medical	

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Case number (if know)

EM Strategies	Last 4 digits of account number	\$48.00
Nonpriority Creditor's Name PO Box 15208	When was the debt incurred?	
Bedford Park, IL 60499		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
EMP of Will County, LLC	Last 4 digits of account number	\$33.00
Nonpriority Creditor's Name	When was the debt incurred?	
PO Box 637527	When was the dept incured:	
Cincinnati, OH 45263		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Exeter Finance Corp		\$10,191.00
Nonpriority Creditor's Name	Last 4 digits of account number	ψ10,131.00
PO Box 166008	When was the debt incurred?	
Irving, TX 75016		
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
■ Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
$\square$ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other, Specify Reposessed Vehicle- 2011 Nissan	

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1 Atanya Marie Miller	Case number (if know)	
Foundation Surgical Hospital of		<b>A.</b>
Hou	Last 4 digits of account number	\$1,300.0
Nonpriority Creditor's Name PO Box 678929 Dallas, TX 75267	When was the debt incurred?	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
Heartland Primary Care		\$1,361.0
Nonpriority Creditor's Name	Last 4 digits of account number	\$1,301.0
215 Remington Blvd Suite F	When was the debt incurred?	
Bolingbrook, IL 60440	As of the date you file the plains in Check all that apply	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
No	Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Medical Debt	
Joliet Radiological	Last 4 digits of account number	\$8.0
Nonpriority Creditor's Name 36910 Treaury Center	When was the debt incurred?	<u> </u>
Chicago, IL 60694  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
N-	Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Other. Specify Medical Debt

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4.1	Joliet Township	Last 4 digits of account number	\$401.00
4	Nonpriority Creditor's Name 300 Caterpillar Drive	When was the debt incurred?	<b>V</b> 10 1100
	Joliet, IL 60436  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u>_</u>	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	$\square$ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.1	Laboratory Corp of America	Last 4 digits of account number	\$16.00
5	Nonpriority Creditor's Name		•
	PO Box 2240	When was the debt incurred?	
	Burlington, NC 27216	As of the data was file the alaim in Oberland all that such	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>		
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.1 6	Medical Recovery Specialists	Last 4 digits of account number	\$281.00
	Nonpriority Creditor's Name 2250 E. Devon Street, Suite 352	When was the debt incurred?	
	Des Plaines, IL 60018  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The state of the s	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
		·	
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other Specify Medical Debt	
	<b>—</b> 103	— Other, Specify	

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MiraMed Revenue Group	Last 4 digits of account number	\$282
Nonpriority Creditor's Name  Dept. 77304	When was the debt incurred?	
Detroit, MI 48277		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Collection	
<b>—</b> 163	Other. Specify	
Nicor Gas	Last 4 digits of account number	\$56
Nonpriority Creditor's Name	<del></del>	
PO Box 632	When was the debt incurred?	
Aurora, IL 60507  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneck all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Utility	
Pathology Consultants of Chicago Nonpriority Creditor's Name	Last 4 digits of account number	\$42
PO Box 88493	When was the debt incurred?	
Chicago, IL 60680		
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not	
•	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	

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Case number (if know)

Debt	Atanya wane willer	Case Humber (II know)	
4.2 0	Phoenix Financial	Last 4 digits of account number	\$48.00
	Nonpriority Creditor's Name PO Box 361450	When was the debt incurred?	
	Indianapolis, IN 46236  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	
4.2	Physicians Immediate Care	Last 4 digits of account number	\$164.00
	Nonpriority Creditor's Name		•
	PO Box 8799	When was the debt incurred?	
	Carol Stream, IL 60197  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	To of the date you me, the stant let offeet an that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Debt	
4.2	Presence Saint Joseph Medical		
2	Cente	Last 4 digits of account number	\$107.00
	Nonpriority Creditor's Name 32814 Collection Center Drive	When was the debt incurred?	
	Chicago, IL 60693  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical Debt	
	<del></del>	— Other, openly	

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Debtor 1 Atanva Marie Miller Case number (if know)

Seas & Associates	Last 4 digits of account number	\$179.00
Nonpriority Creditor's Name PO Box 15174 Little Rock, AR 72231	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans	
Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Collection	
Sprint	Last 4 digits of account number	\$839.0
Nonpriority Creditor's Name	<del></del>	
PO Box 629023 El Dorado Hills, CA 95762	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
lebt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Utility	
US Department of Education	Last 4 digits of account number	Unknow
Nonpriority Creditor's Name		O manow
PO Box 4222	When was the debt incurred?	
Iowa City, IA 52244  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The state of the s	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify	
List Others to Be Notified About a Deb	ot That You Already Listed bout your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if	a collection agen
ng to collect from you for a debt you owe to son nore than one creditor for any of the debts that	meone else, list the original creditor in Parts 1 or 2, then list the collection agency here you listed in Parts 1 or 2, list the additional creditors here. If you do not have addition	e. Similarly, if you
d for any debts in Parts 1 or 2, do not fill out or	r <b>submit this page.</b> On which entry in Part 1 or Part 2 did you list the original creditor?	
	ine <b>4.17</b> of (Check one):	

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Debtor 1 Atanya Marie Miller

1900 Silver Cross Blvd New Lenox, IL 60451

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				7	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	17,676.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	17,676.00

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			THE THIRD ENGINEER	
Fill in this infor	mation to identify your	case:		
Debtor 1	Atanya Marie Mill	ler		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is an
				amended filing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	h whom you have the cer, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3	<u> </u>		<u> </u>		
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4					
۷.٦	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
	,		2.0.0		

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		Docume	ent Page 29 d	of 52
Fill in this	information to identify you	ur case:		
Debtor 1	Atanya Marie N	liller		
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name	
United Sta	tes Bankruptcy Court for the	: NORTHERN DISTRICT	OF ILLINOIS	
Case num	ber			
(if known)				☐ Check if this is an
				amended filing
Officia	l Form 106H			
		dobtoro		4045
Sched	lule H: Your Co	aeptors		12/15
<b>1. Do</b> ■ No □ Yes	•	(If you are filing a joint case,	do not list either spouse	as a codebtor.
□ 168	•			
				ry? (Community property states and territories include
Arizon	ia, California, Idano, Louisiar	na, Nevada, New Mexico, Pu	епо кісо, техаs, vvasn	ington, and wisconsin.)
■ No.	Go to line 3.			
☐ Yes	s. Did your spouse, former sp	oouse, or legal equivalent live	e with you at the time?	
in line Form	e 2 again as a codebtor onl	y if that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 16G). Use Schedule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and	d ZID Codo		Column 2: The creditor to whom you owe the debt
	Name, Number, Offeet, Oity, Otale and	a Zii Gode		Check all schedules that apply:
3.1				☐ Schedule D, line
	Name			Schedule E/F, line
				☐ Schedule G, line
	Number Street			_
	City	State	ZIP Code	
				_
3.2	Name			Schedule D, line
	INGING			☐ Schedule E/F, line
_				☐ Schedule G, line
	Number Street City	State	ZIP Code	
			0000	

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EIII	in this information to identify your ca	250.									
	otor 1 Atanya Mari										
	otor 2 ouse, if filing)				_						
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_						
(If kr	se number nown)		-				nended oplemer	I filing nt showing s of the fol			apter
	fficial Form 106I					MM /	DD/ YY	/YY			
S	chedule I: Your Inc	ome									12/15
sup spo atta Par	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.	are married and not filing wi	ng jointly, and your ith you, do not inclu	spouse i ide inforr	s livir natio	ng with yoເ n about yo	ı, inclu ur spot	de inform use. If moi	ation al	bout you e is nee	ur eded,
1.	Fill in your employment information.		Debtor 1			De	Debtor 2 or non-filing spouse				
	If you have more than one job, attach a separate page with	Employment status	■ Employed				☐ Employed				
	information about additional employers.	,	☐ Not employed				☐ Not employed				
		Occupation	Substance Abu	se Cour	nselo	or					
	Include part-time, seasonal, or self-employed work.	Employer's name	Westcare Illinoi	is							
	Occupation may include student or homemaker, if it applies.	Employer's address	Sheridan, IL								
		How long employed to	here? 6 years	3							
Par	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to r	eport for	any lir	ne, write \$0	in the s	space. Incl	ude you	ır non-fili	ing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the informatio	n for all e	employ	yers for that	person	on the line	es belov	w. If you	need
						For Debtor	1	For Debi			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_	3,81	7.18	\$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$_		0.00	+\$	!	N/A	

Calculate gross Income. Add line 2 + line 3.

3,817.18

N/A

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Deb	otor 1	Atanya Marie Miller	-	(	Case	number (if known)				
	0	vy line. A hore	4			Debtor 1	non-	Debtor filing s	pouse	
	Cop	y line 4 here	4.		\$_	3,817.18	\$		N/A	<u> </u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a	ì.	\$_	664.26	\$		N/A	_
	5b.	Mandatory contributions for retirement plans	5b		\$_	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	50		\$_	0.00	\$		N/A	_
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d 5e		\$_ \$	0.00 592.80	\$ \$		N/A N/A	_
	5f.	Domestic support obligations	5f.		\$ _	0.00	\$		N/A	_
	5g.	Union dues	59		<u> </u>	0.00	\$		N/A	_
	5h.	Other deductions. Specify:	_	1.+	\$		+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,257.06	\$		N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	2,560.12	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	<b>1</b> .	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b	).	\$	0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$_	0.00	\$		N/A	_
	8d. 8e.	Unemployment compensation Social Security	8d 8e		\$_ \$	0.00	\$		N/A N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.		\$_	0.00	\$		N/A	_ <u>\</u>
	8g.	Pension or retirement income	89		\$_	0.00	\$		N/A	
	8h.	Other monthly income. Specify:	_ 8n	1.+	\$_	0.00	+ \$		N/A	<u>\</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	<u> </u>	0.00	\$		N/	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,560.12 + \$		N/A	= \$	2,560.12
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-		2,000.12				2,000.12
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your per friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe					chedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	2,560.12
13.	Do	you expect an increase or decrease within the year after you file this form	?						Combi month	ined ly income
		No.								
		Voc Evoloin:								

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Fill	in this informa	tion to identify yo	our case:							
Deb	otor 1	Atanya Marie	e Miller			Ch	neck if	this is:		
								amended filing		
	otor 2 ouse, if filing)								ving postpetition chapter the following date:	•
``		. 0 . (	NODTU	EDN DISTRICT OF ILLIN	OIC					
Unit	ed States Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF ILLIN	OIS		IVIIVI	/ DD / YYYY		
1	e number nown)									
O	fficial Fo	rm 106J				ı				
		J: Your	Expen	ISES					12	/1
Be info	as complete a ormation. If m mber (if know	and accurate as	possible. eded, atta y question	If two married people ar ch another sheet to this					r supplying correct	
1.	Is this a join		iloid							_
	■ No. Go to	line 2. s Debtor 2 live i	in a separa	ate household?						
	□N	0	·	al Form 106J-2, <i>Expenses</i>	for Sonarato House	shold of D	obtor 3	,		
0			_	ari omi 1005-2, <i>Expenses</i>	Tor Separate House	eriola di Di	SDIOI 2	••		
2.	•	e dependents?	□ No	Fill out this information for	Danandantia valat	ianahin ta		Denondent's	Daga danan dant	
	Do not list Do Debtor 2.	eptor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto			Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.			Daughter			17	Yes	
					Daughter			20	□ No ■ Yes	
					<u> </u>				■ res □ No	
					Son			23	■ Yes	
									□ No	
3.	Do your exp	enses include	_	No					☐ Yes	
		f people other ti d your depende	han 👝	Yes						
Est	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		n assistance an		government assistance i luded it on <i>Schedule I:</i> \				Your expe	enses	
4.				ses for your residence.	nclude first mortgag	e 4.	\$		850.00	
	. ,	nd any rent for the	e ground 0	i iot.		٠.	<b>–</b>			
	if not includ	led in line 4:								
		estate taxes		o incurance		4a.			0.00	
	•	rty, homeowner's maintenance, re		s insurance ipkeep expenses		4b. 4c.	_		0.00 100.00	
		owner's associat				4d.			0.00	
5.	Additional r	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

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ebtor 1 Ata	anya Marie Miller	Case number (if known)	
Utilities:			
	ectricity, heat, natural gas	6a. \$	170.00
	ater, sewer, garbage collection	6b. \$	60.00
	lephone, cell phone, Internet, satellite, and cable services	6c. \$	160.00
	ner. Specify:	6d. \$	0.00
	d housekeeping supplies	7. \$	600.00
	e and children's education costs	8. \$	
		9. \$	0.00
•	, laundry, and dry cleaning	· —	300.00
	I care products and services	10. \$	100.00
	and dental expenses	11. \$	20.00
	rtation. Include gas, maintenance, bus or train fare.	12. \$	100.00
	clude car payments.	13. \$	
	nment, clubs, recreation, newspapers, magazines, and books	· —	20.00
	le contributions and religious donations	14. \$	0.00
5. Insurance			
	clude insurance deducted from your pay or included in lines 4 or 20. e insurance	15a. \$	0.00
	alth insurance	15b. \$	
		· —	0.00
	hicle insurance	15c. \$	0.00
	ner insurance. Specify:	15d. \$	0.00
	o not include taxes deducted from your pay or included in lines 4 or		
Specify:		16. \$	0.00
	ent or lease payments:	47a ¢	0.00
	r payments for Vehicle 1	17a. \$	0.00
	r payments for Vehicle 2	17b. \$	0.00
	ner. Specify:	17c. \$	0.00
	ner. Specify:	17d. \$	0.00
	ments of alimony, maintenance, and support that you did not re		0.00
	d from your pay on line 5, Schedule I, Your Income (Official Form		
	yments you make to support others who do not live with you.	\$	0.00
Specify:	- Lancardo com a como como de la como de la Compania de la Compani	19.	
	al property expenses not included in lines 4 or 5 of this form or		0.00
	ortgages on other property	20a. \$	0.00
	al estate taxes	20b. \$	0.00
	operty, homeowner's, or renter's insurance	20c. \$	0.00
20d. Ma	intenance, repair, and upkeep expenses	20d. \$	0.00
20e. Hoi	meowner's association or condominium dues	20e. \$	0.00
. Other: Sp	pecify:	21. +\$	0.00
Coloulata			
	e your monthly expenses	<b>*</b>	0.400.00
	lines 4 through 21.	\$	2,480.00
	y line 22 (monthly expenses for Debtor 2), if any, from Official Form	106J-2 \$	
22c. Add	line 22a and 22b. The result is your monthly expenses.	\$	2,480.00
Calculate	a your monthly not income		
	e your monthly net income.  py line 12 (your combined monthly income) from Schedule I.	222 °	0 500 40
		23a. \$	2,560.12
23b. Cop	py your monthly expenses from line 22c above.	23b\$	2,480.00
220 0	htraat vour monthly ovnonged from vour monthly income		
	btract your monthly expenses from your monthly income.	23c. \$	80.12
ine	e result is your monthly net income.	200.	
4 Do vou e	expect an increase or decrease in your expenses within the year	after you file this form?	
	ole, do you expect to finish paying for your car loan within the year or do you e		or decrease because c
	on to the terms of your mortgage?	, , , , , , , , , , , , , , , , , , ,	
■ No.			
☐ Yes.	Explain here:		

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Fill in this	s information to identify your	case:			
Debtor 1					
Debioi	Atanya Marie Mill	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	lling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	T OF ILLINOIS		
Case num	nber				
(if known)					☐ Check if this is an
					amended filing
If two mar You must obtaining	rried people are filing together file this form whenever you fi money or property by fraud in	r, both are equally respo ile bankruptcy schedule n connection with a ban	onsible for supplying cor	rect information. . Making a false statem	
years, or I	both. 18 U.S.C. §§ 152, 1341, 1	l519, and 3571.			
Did	you pay or agree to pay some	eone who is NOT an atto	rney to help you fill out b	eankruptcy forms?	
•	No				
	Yes. Name of person				ptcy Petition Preparer's Notice,
				Declaration, a	nd Signature (Official Form 119)
	er penalty of perjury, I declare they are true and correct.	that I have read the sum	nmary and schedules file	d with this declaration	and
х /	s/ Atanya Marie Miller		X		
7	Atanya Marie Miller		Signature of	Debtor 2	
5	Signature of Debtor 1				
[	Date May 9, 2017		Date		

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Fill in	this inform	ation to identify you	r case:							
Debto	r 1	Atanya Marie Mi								
		First Name	Middle Name	Last Name						
Debto (Spouse	r 2 e if, filing)	First Name	Middle Name	Last Name						
United	l States Bar	kruptcy Court for the:	NORTHERN DISTRICT (	OF ILLINOIS						
		. ,								
Case number(if known)					_	☐ Check if this is an amended filing				
Offic	cial For	m 107								
Stat	ement	of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/16				
inform	ation. If me er (if known	ore space is needed, ). Answer every ques	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup additional pages, write you					
	Part 1: Give Details About Your Marital Status and Where You Lived Before  What is your current marital status?									
	Married Not mari	ried								
2. Di	uring the la	st 3 vears. have you	lived anywhere other than	where you live now?						
	During the last 3 years, have you lived anywhere other than where you live now?									
	No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.									
D	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there				
					ity property state or territory co, Texas, Washington and V					
	No Yes. Ma	ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).						
Part 2	Explair	n the Sources of You	r Income							
Fi	II in the tota	amount of income yo	u received from all jobs and a	g a business during this yeall businesses, including partetogether, list it only once un		ndar years?				
		in the details.								
		are detaile.	Deliterat		Daktano					
			Debtor 1 Sources of income	Gross income	Debtor 2 Sources of income	Gross income				
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)				
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$8,135.96	☐ Wages, commissions, bonuses, tips					
			☐ Operating a business		☐ Operating a business					

Official Form 107

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Debtor				Debtor 1	or 1			Debtor 2		
For last calendar year:				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)		
			31, 2016 )	■ Wages, commissions, bonuses, tips	\$32,742.00	☐ Wages, commissions, bonuses, tips				
				☐ Operating a business		☐ Operating a business				
For the calendar year before that: (January 1 to December 31, 2015 )				■ Wages, commissions, bonuses, tips	\$30,752.00	☐ Wages, commissions, bonuses, tips				
				☐ Operating a business		☐ Operating a	business			
5.	Include in and other winnings.  List each	come regard public bene If you are fil	dless of whet fit payments ing a joint ca the gross inc	ne during this year or the two her that income is taxable. Exa ; pensions; rental income; inter se and you have income that y ome from each source separat	amples of other income are a est; dividends; money collec- you received together, list it	alimony; child supp cted from lawsuits; only once under De	royalties; an ebtor 1.			
				Debtor 1		Debtor 2				
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)		
Pa	rt 3: Lis	t Certain Pa	ıvments You	ı Made Before You Filed for I	Bankruptcv					
6.		r Debtor 1's Neither D	or Debtor 2 ebtor 1 nor	2's debts primarily consumer Debtor 2 has primarily consu a personal, family, or househol	debts? Imer debts. Consumer debt	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an		
		During the	90 days bef	ore you filed for bankruptcy, die	d you pay any creditor a tota	al of \$6,425* or mo	re?			
		☐ Yes	List below paid that c	each creditor to whom you pai reditor. Do not include paymen	its for domestic support obliq					
		* Subject		e payments to an attorney for that not on 4/01/19 and every 3 years		or after the date o	of adjustment			
	Yes.			or both have primarily consu ore you filed for bankruptcy, di		al of \$600 or more?	?			
		□ No.	Go to line							
		■ Yes	include pa	each creditor to whom you pai- yments for domestic support ol or this bankruptcy case.						
	Creditor's Name and Address			Dates of payme	nt Total amount paid	Amount you still owe	Was this p	payment for		
	Christine Lane			Feb, March, A Rent	pril \$2,550.00	\$0.00	☐ Mortgaç ☐ Car ☐ Credit 0 ☐ Loan Ro	Card		

Other\_

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Document Page 37 of 52 ase number (if known) Debtor 1 **Atanya Marie Miller** Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened **Exeter Finance Corp** 2011 Nissan September, Unknown 2016 PO Box 204480 Dallas, TX 75320 Property was repossessed. ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

Yes Case 17-14530 Doc 1 Filed 05/09/17 Entered 05/09/17 15:13:33 Desc Main

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Case number (if known) Document Debtor 1 Atanya Marie Miller

Pa	tt 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankruptcy  ■ No □ Yes. Fill in the details for each gift.	, did you give any gifts with a total value of more t	han \$600 per person′	,	
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value	
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankruptcy  ■ No  □ Yes. Fill in the details for each gift or contribute.	did you give any gifts or contributions with a tota	Il value of more than	\$600 to any charity?	
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value	
Pa	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankruptcy or gambling?  ■ No □ Yes. Fill in the details.	or since you filed for bankruptcy, did you lose anyt	thing because of thef	t, fire, other disaster,	
	how the loss occurred Include	ribe any insurance coverage for the loss de the amount that insurance has paid. List pending ance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost	
Pa	rt 7: List Certain Payments or Transfers				
16.					
	□ No ■ Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment	
	Banyon & Scheinbaum, LLC 3077 West Jefferson Street Suite 107 Joliet, IL 60435	\$650 (Attorney Fee) + \$335 (Filing Fee) = \$985		\$985.00	
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li		or transfer any prope	rty to anyone who	
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment	

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Debtor 1 Atanya Marie Miller

18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu Include both outright transfers and transfers mainclude gifts and transfers that you have already  No	isiness or financial affa de as security (such as t	i <b>irs?</b> he granting of a se			
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and voproperty transferr			e any property or s received or debts xchange	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-proton No.		y property to a se	elf-settled t	rust or similar device o	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and v	alue of the prope	erty transfer	rred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Stor	age Units		
	<u> </u>	•	·			
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or	•				
	houses, pension funds, cooperatives, assoc			r deposit, e	marco in banko, orcan	umons, brokerage
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accoun instrument	cl m	ate account was losed, sold, noved, or ansferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yeash, or other valuables?	ear before you filed for	bankruptcy, any	safe depos	sit box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the	e contents	Do you still have it?
22.	Have you stored property in a storage unit or	r place other than your	home within 1 ye	ear before y	ou filed for bankrupto	y?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		escribe the	e contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control f	or Someone Else				
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in for someone.						or, or hold in trust
	■ No □ Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, St Code)		escribe the	e property	Value
Par	t 10: Give Details About Environmental Info	rmation				
For	the purpose of Part 10, the following definitio	ns apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Debtor 1 **Atanya Marie Miller** 

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.						
Report all notices, releases, and proceedings that you know about, regardless of when they occurred.						
Has	any governmental unit notified you that	you may be liable or potentially liable	unc	der or in violation of an environme	ental law?	
	No					
	Yes. Fill in the details.					
		Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice	
Hav	e you notified any governmental unit of	any release of hazardous material?				
	No Yes. Fill in the details.					
		Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice	
Hav	e you been a party in any judicial or adm	ninistrative proceeding under any envi	roni	mental law? Include settlements a	ind orders.	
	No Yes. Fill in the details.					
		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case	
t 11:	Give Details About Your Business or 0	Connections to Any Business				
Wit	— nin 4 vears before vou filed for bankrunt	cy, did you own a business or have ar	v of	the following connections to any	husiness?	
	• • •	•	•	•		
	_					
			S.			
		Describe the nature of the business				
		Name of accountant or bookkeeper			number or itin.	
		cy, did you give a financial statement	to aı		de all financial	
	Yes. Fill in the details below.					
Ad	dress	Date Issued				
	Ort a Hass Nan Ad Hav Nan Ad Hav Wittl Bud (Num Wittl inst	Has any governmental unit notified you that  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  Have you notified any governmental unit of a No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code)  Have you been a party in any judicial or adm No Yes. Fill in the details.  Case Title Case Number  Case Number  Have you been a party in any judicial or adm A no No Yes. Fill in the details.  Case Title Case Number  A sole proprietor or self-employed in A member of a limited liability company A partner in a partnership An officer, director, or managing executed in An owner of at least 5% of the voting No. None of the above applies. Go to Person Yes. Check all that apply above and fill Business Name Address (Number, Street, City, State and ZIP Code)  Within 2 years before you filed for bankrupton institutions, creditors, or other parties.	ort all notices, releases, and proceedings that you know about, regardless of when Has any governmental unit notified you that you may be liable or potentially liable.  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of any release of hazardous material?  No Yes. Fill in the details.  Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or administrative proceeding under any envious Name No Yes. Fill in the details.  Case Title Case Number Case Number  Court or agency Name Address (Number, Street, City, State and ZIP Code)  Within 4 years before you filed for bankruptcy, did you own a business or have are A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnersh A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business Business Name Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Within 2 years before you filed for bankruptcy, did you give a financial statement institutions, creditors, or other parties.  No Yes. Fill in the details below.  Name Date Issued	ort all notices, releases, and proceedings that you know about, regardless of when the Has any governmental unit notified you that you may be liable or potentially liable under the has any governmental unit notified you that you may be liable or potentially liable under the has any governmental unit notified you that you may be liable or potentially liable under the has any governmental unit of any release of hazardous material?  No	ort all notices, releases, and proceedings that you know about, regardless of when they occurred.  Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental violation violation of an environmental violation violation violation of an environmental violation v	

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 17-14530 Doc 1 Filed 05/09/17 Entered 05/09/17 15:13:33 Desc Main Page 41 of 52
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Debtor 1 Atanya Marie Miller

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Atanya Marie Miller	
Atanya Marie Miller	Signature of Debtor 2
Signature of Debtor 1	
Date May 9, 2017	Date
Did you attach additional	pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No	
☐ Yes	
Did you pay or agree to p	ay someone who is not an attorney to help you fill out bankruptcy forms?
No	
☐ Yes. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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			3.5	
Fill in this info	rmation to identify your case:			
Debtor 1	Atanya Marie Miller			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the: NOR	THERN DISTI	RICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
If you are an inc creditors have you have lead You must file the which on the lift two married programs are sign at the write your sign and the write	nt of Intention for dividual filing under chapter 7, we claims secured by your proposed personal property and the his form with the court within 3 ever is earlier, unless the court of form the property and the form.  The property are filing together in a joint date the form.  The property and t	you must fill operty, or lease has no 0 days after y t extends the point case, both more space is a f known).		et for the meeting of creditors, ne creditors and lessors you list nformation. Both debtors must
1. For any credi			Creditors Who Have Claims Secured by Propert	y (Official Form 106D), fill in the
information be Identify the c	elow. reditor and the property that is c	ollateral	What do you intend to do with the property that secures a debt?	t Did you claim the property as exempt on Schedule C?
Creditor's			☐ Surrender the property.	□No
name:			Retain the property and redeem it.	
Description	£		☐ Retain the property and enter into a	☐ Yes
Description o property	Т		Reaffirmation Agreement.	
securing deb	t:		☐ Retain the property and [explain]:	
One dite de				——————————————————————————————————————
Creditor's name:			<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>	□ No
namo.			Retain the property and redeem it.  Retain the property and enter into a	☐ Yes
Description o	f		Reaffirmation Agreement.	
property			☐ Retain the property and [explain]:	
securing deb	t:			_

Official Form 108

Creditor's

Creditor's

Description of

securing debt:

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 $\square$  Surrender the property.

☐ Surrender the property.

 $\hfill\square$  Retain the property and redeem it.

 $\hfill\square$  Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

□ No

☐ Yes

☐ No

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Debtor 1	Atanya Marie Miller	Case number (if known)	
name:		<ul><li>☐ Retain the property and redeem it.</li><li>☐ Retain the property and enter into a</li></ul>	□Yes
Descrip	ption of	Reaffirmation Agreement.	
propert securin	ty ng debt:	☐ Retain the property and [explain]:	-
For any u	ormation below. Do not list real estate	rty Leases t you listed in Schedule G: Executory Contracts and Unexpired e leases. Unexpired leases are leases that are still in effect; the erty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property le	ases	Will the lease be assumed?
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Lessor's r	nama:		□ No
Description	on of leased		
Property:			☐ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		☐ Yes
Part 3:	Sign Below		
Under per		ndicated my intention about any property of my estate that sec	cures a debt and any personal
	Atanya Marie Miller	x	
	nya Marie Miller nature of Debtor 1	Signature of Debtor 2	
Date	May 9, 2017	Date	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-14530 Doc 1 Filed 05/09/17 Entered 05/09/17 15:13:33 Desc Main Document Page 48 of 52

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In re	Atanya Marie Miller		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COM	IPENSATION OF ATTOR	RNEY FOR DI	EBTOR(S)
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the rendered on behalf of the debtor(s) in contempl	ne filing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	650.00
	Prior to the filing of this statement I have rece	eived	\$	650.00
	Balance Due		\$	0.00
2. T	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3. Т	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4. <b>I</b>	■ I have not agreed to share the above-disclosed	compensation with any other person	unless they are mem	bers and associates of my law firm
I	☐ I have agreed to share the above-disclosed concopy of the agreement, together with a list of t	npensation with a person or persons whe names of the people sharing in the	who are not members compensation is atta	or associates of my law firm. A ached.
5. I	In return for the above-disclosed fee, I have agree	d to render legal service for all aspect	s of the bankruptcy of	case, including:
b c	Analysis of the debtor's financial situation, and Preparation and filing of any petition, schedule Representation of the debtor at the meeting of of [Other provisions as needed]  Negotiations with secured creditor reaffirmation agreements and appli 522(f)(2)(A) for avoidance of liens of	s, statement of affairs and plan which creditors and confirmation hearing, and sto reduce to market value; exercications as needed; preparation	may be required; and any adjourned hea emption planning;	rings thereof; preparation and filing of
6. E	By agreement with the debtor(s), the above-disclosure Representation of the debtors in ar		service:	
		CERTIFICATION		
	certify that the foregoing is a complete statement ankruptcy proceeding.	of any agreement or arrangement for	payment to me for r	epresentation of the debtor(s) in
M	ay 9, 2017	/s/ Christina Bany		
Da	ate	Christina Banyon Signature of Attorne		
		Banyon & Schein		
		3077 West Jeffers		
		Suite 107 Joliet, IL 60435		

cbanyon.law@gmail.com

Name of law firm

### **United States Bankruptcy Court** Northern District of Illinois

In re	Atanya Marie Miller		Case No.	
		Debtor(s)	Chapter <b>7</b>	
	VEI	RIFICATION OF CREDITOR MA	TRIX	
		Number of C	reditors:	26
	The above-named Debtor(s) I (our) knowledge.	hereby verifies that the list of creditor	rs is true and correct to t	he best of my
Date:	May 9, 2017	/s/ Atanya Marie Miller Atanya Marie Miller Signature of Debtor		

American Anesthesiology Assoc. PO Box 936 Bedford Park, IL 60499

Amsurg Surgery Center 998 129th Infantry Drive Joliet, IL 60435

Central Credit Services PO Box 1879 Saint Charles, MO 63302

Chase Receivables PO Box 159 Hawthorne, NY 10532

Creditors Protection Service 308 W. State Street, Suite 485 Rockford, IL 61101

Dr Lucy Dey 202 N. Hammes Avenue Suite C Joliet, IL 60435

DuPage Pathology 520 E. 22nd Street Lombard, IL 60148

EM Strategies PO Box 15208 Bedford Park, IL 60499

EMP of Will County, LLC PO Box 637527 Cincinnati, OH 45263

Exeter Finance Corp PO Box 166008 Irving, TX 75016

Foundation Surgical Hospital of Hou PO Box 678929 Dallas, TX 75267

Heartland Primary Care 215 Remington Blvd Suite F Bolingbrook, IL 60440

Joliet Radiological 36910 Treaury Center Chicago, IL 60694

Joliet Township 300 Caterpillar Drive Joliet, IL 60436

Laboratory Corp of America PO Box 2240 Burlington, NC 27216

Medical Recovery Specialists 2250 E. Devon Street, Suite 352 Des Plaines, IL 60018

MiraMed Revenue Group Dept. 77304 Detroit, MI 48277

Nicor Gas PO Box 632 Aurora, IL 60507

Pathology Consultants of Chicago PO Box 88493 Chicago, IL 60680

Phoenix Financial PO Box 361450 Indianapolis, IN 46236

Physicians Immediate Care PO Box 8799 Carol Stream, IL 60197

Presence Saint Joseph Medical Cente 32814 Collection Center Drive Chicago, IL 60693

Seas & Associates PO Box 15174 Little Rock, AR 72231

Silver Cross Hospital 1900 Silver Cross Blvd New Lenox, IL 60451

Sprint PO Box 629023 El Dorado Hills, CA 95762

US Department of Education PO Box 4222 Iowa City, IA 52244